

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

1387473 OMB APPROVAL

OMB Number: 3235-0076

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Expires:.....April 30, 2008
Estimated average burden



07041284

Name of Offering (Check if this is an amendment and name has changed, and indicate change.)									
Northern Freegold Resources Ltd. Units of Common Shares and Common Share Warrants									
Filing Under (Check box(es) that apply.): Rule 504 Rule 505 X Rule 506	6 Section 4(6) ULOE								
Type of Filing: X New Amendment									
A. BASIC IDENTIFICATION DATA									
Enter the information requested about the issuer.									
Name of Issuer (Check if this is an amendment and name has changed, and indicate chan	ge.)								
Northern Freegold Resources Ltd.									
Address of Executive Offices (Number and Street, City, State, Zip Code) Suite 203, 455 Granville St., Vancouver, BC V6C 1T1 CANADA	Telephone Number (including Area Code) (604) 893-8757								
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) — same as above	Telephone Number (including Area Code) CCE same as above —								
Brief Description of Business	99ED								
Mineral exploration and development. JAN 2 4 2	2007 E								
Type of Business Organization: X corporation Ilimited partnership, already business trust Ilimited partnership #9860									
Actual or Estimated Date of Incorporation or Organization: Month Year O 1 Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbrace Canada; FN for other foreign jurisdiction.)									

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any change thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

— ATTENTION –

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATI	ON DATA	•
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the Each beneficial owner having the power to vote or dispose, or direct the securities of the issuer; Each executive officer and director of corporate issuers and of corporate 	past five years; vote or disposition of	
 Each general and managing partner of partnership issuers. 		
Check Box(es) that Apply: Promoter Beneficial Owner Executive C	Officer X Director	General and/or Managing Partner
Full Name (Last name first, if individual)		· <u> </u>
Termuende, Timothy J.		
Business or Residence Address: (Number and Street, City, State, Zip Code) Suite 203, 455 Granville St., Vancouver, BC V6C 1T1 CANA	ADA	
Check Box(es) that Apply: Promoter Beneficial Owner X Executive C		General and/or Managing Partner
Full Name (Last name first, if individual)		
Harris, Bill		
Business or Residence Address: (Number and Street, City, State, Zip Code)		
Suite 203, 455 Granville St., Vancouver, BC V6C 1T1 CANA	ADA	
Check Box(es) that Apply: Promoter Beneficial Owner X Executive C	Officer X Director	General and/or Managing Partner
Full Name (Last name first, if individual) Diduck, Glen		
Business or Residence Address: (Number and Street, City, State, Zip Code)		
Suite 203, 455 Granville St., Vancouver, BC V6C 1T1 CANA	ADA	
Check Box(es) that Apply: Promoter Beneficial Owner X Executive C	Officer X Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Craig, Susan P.		
Business or Residence Address: (Number and Street, City, State, Zip Code)	A D.A	
Suite 203, 455 Granville St., Vancouver, BC V6C 1T1 CANA		
Check Box(es) that Apply: Promoter Beneficial Owner Executive (Officer X Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Fach, Darren B.		
Business or Residence Address: (Number and Street, City, State, Zip Code) 1605 Summit St., Calgary, AB, T3C 2L8 CANADA		
Check Box(es) that Apply: Promoter Beneficial Owner Executive (Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)		
Business or Residence Address: (Number and Street, City, State, Zip Code)		
Sustiness of Residence Address. (Number and Street, Oily, State, 2th Code)		
Check Box(es) that Apply: Promoter Beneficial Owner Executive (Officer Director	General and/or Managing Partner
Full Name (Last name first, if individual)	Sincer Director	Octional Endoughing Faction
-un Marie (Last flame mst, ii mulvidual)		
Business or Residence Address: (Number and Street, City, State, Zip Code)		•
	Officer Director	General and/or Managing Partner
Check Box(es) that Apply: Promoter Beneficial Owner Executive C		
Check Box(es) that Apply: Promoter Beneficial Owner Executive C		
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					B. i	NFOR	MATIC	ON AE	BOUT	OFFE	RING				
										<u> </u>				Yes	No
1. Has (A	the issue nswer al	er sold, d so in Ap	or does opendix,	the iss Colun	uer inte nn 2, if t	nd to s iling ur	ell, to r	non-acc .OE.)	redited	investo	rs in thi	is offering	ı?		X
2. Wha	t is the m	inimum	investr	nent th	at will b	e acce	pted fro	om any	individu	ıal?	•••••	•••••	\$CDN	1,00	
3. Does	the offe	ring per	mit join	t owne	rship of	a singl	e unit?	••••				************		Yes X	No
or sii listed name	milar ren I is an a	nunerati ssociate proker o	on for s ed perso r dealer	olicitat on or a . If mo	ion of p igent of ire than	ourchas a brol five (5	sers in ker or () perso	connect dealer r	tion wit	h sales ed with	of sec	urities in C and/o	y or indirectly, ar the offering. If a r with a state or of such a broker	persor states,	to be
Full Nam Global					d.										·
Business 7770 El								te, Zip (Code)						
Name of	Associat	ed Broke	er or Dea	aler											
States in (Che														AII	States
ΑL	<u>AK</u>	<u>AZ</u>	AR	CA	CO	СТ	DE	DC	<u>FL</u>	<u>GA</u>	<u>HI</u>	ID			
<u>IL</u>	<u>IN</u>	IA	KS	KY	<u>LA</u>	ME	MD	<u>MA</u>	<u>MI</u>	MN	MS	<u>MO</u>			
M [*]	r ne	NV	NH	NJ	NM	NY	<u>NC</u>	ND	<u>ОН</u>	OK	<u>OR</u>	PA			
RI	SC	SD	TN	<u>TX</u>	UT	VŤ	VA	<u>WA</u>	W	WI	<u>WY</u>	PR			
Full Nam	e (Last n	ame firs	t, if indiv	idual)											
Business	or Resid	ence Ad	ldress:	(Numbe	er and S	treet, C	ity, Sta	te, Zip (Code)						
Name of	Associat	ed Broke	er or Dea	aler											
States in															Ctatas
•	ck "All St													An	States
AL		AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID			
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Mi		NV	NH	NJ	NM	ΝΥ	NC	ND	OH	OK	OR	PA			
RI	SC	SD	TN	TX	UT	VT	VA	WA		WI	WY	PR			
Full Nam	e (Last n	ame first	t, if indiv	idual)											
Business	or Resid	ence Ad	ldress:	(Numbe	er and S	treet, C	ity, Sta	te, Zip (Code)				.		
Name of	Associat	ed Broke	er or Dea	aler											
States in (Chec	•		-								************	*************		. [] All	States
AL	. AK	AZ	AR	CA	CO	СТ	DE	DC	FL	GA	н	ID			
\$L		IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	МО			
M	NE.	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA			
R	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Equity S	1. Enter the Aggregate price of securities included in this offering and the total are			NOC	CEEDS	<u> </u>
Debt	already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offer check this box and indicate in the columns below the amounts of the securities offered	ering,	Offering			
Equity Common						
Convertible Securities (including warrants) \$ 0			_	-	\$ _	0
Partnership Interests: Units of Common Shares and Common Share Warrants) \$ 0 \$ \$ 0 \$ \$ 0 \$ \$ \$ \$ 0 \$ \$ \$ \$ \$ \$	Equity Preferred	\$_	0	-	\$_	0
Other (Specify: Units of Common Shares and Common Share Warrants) \$CDN 630,000 \$CDN 519,561 (1) Total	Convertible Securities (including warrants)	\$_	0	_	\$_	0
Total	Partnership Interests	\$_	0	-	\$_	0
(Answer also in Appendix, Column 3, if filing under ULOE.) 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "nestors" Accredited Investors.	Other (Specify: Units of Common Shares and Common Share Warrants)	\$CDN _	630,000	_	\$CDN_	519,561 ⁽¹⁾
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Accredited Investors	Total	\$CDN _	630,000	_ :	\$CDN_	519,561 ⁽¹⁾
Total (for filings under Rule 504 only) (Answer also in Appendix, Column 4, if filing under ULOE.) 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505. Regulation A. Regulation A. N/A Total. A. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs Legal Fees. X \$CDN 7,500 Accounting Fees. Engineering Fees. Sales Commissions (specify finders' fees separately) Other Expenses (Identify: Blue Sky fees) X \$CDN 4,825	securities in this offering and the aggregate dollar amounts of their purchases. For offe under Rule 504, indicate the number of persons who have purchased securities and aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "non "zero."	erings d the ne" or	<u>Investors</u>	_ :	\$CDN_	Dollar Amount of <u>Purchases</u>
(Answer also in Appendix, Column 4, if filing under ULOE.) 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Type of Offering Rule 505	Non-accredited Investors		0	_	\$	0
3. If this filling is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1. Rule 505	Total (for filings under Rule 504 only)		N/A		\$	N/A
Regulation A	securities sold by the issuer, to date, in offerings of the types indicated, in the twelve months prior to the first sale of securities in this offering. Classify securities by type in Part C—Question 1. <u>Type of Offering</u>	e (12) listed	Security		\$	Dollar Amount Sold N/A
Rule 504		_		-	\$	N/A
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees	·	_		_	\$	N/A
the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees. Transfer A	Total		N/A	_	\$	N/A
Printing and Engraving Costs \$ 0 Legal Fees X \$CDN 7,500 Accounting Fees \$ 0 Engineering Fees \$ 0 Sales Commissions (specify finders' fees separately) X \$CDN 33,761 (2) Other Expenses (Identify: Blue Sky fees) X \$CDN 4,825	the securities in this offering. Exclude amounts relating solely to organization expens the issuer. The information may be given as subject to future contingencies. I amount of an expenditure is not known, furnish an estimate and check the box to the of the estimate.	ses of If the ne left			\$00V	700
Legal Fees	•					
Accounting Fees					•	
Engineering Fees \$ 0 Sales Commissions (specify finders' fees separately) \$ \text{X} \$ \text{CDN} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	·					
Sales Commissions (specify finders' fees separately)					•	
Other Expenses (Identify: Blue Sky fees) 4,825	•			=	*CDN	
	O I O I I I I I I CONTROL CONT			ш		
TotalX \$CDN 46,786				X	\$CDN	4,825
	Other Expenses (Identify: Blue Sky fees)					

C. OFFERING PRICE, NU	IMBER OF INVESTOR	S. EXPENSES	AN	ID L	ISE OF P	ROCI	EEDS	
 b. Enter the difference between the a Part C—Question 1 and total expenses 4.a. This difference is the "adjusted green." 	ggregate offering price give furnished in response to P	en in response to)					583,21
5. Indicate below the amount of the adj proposed to be used for each of the purpose is not known, furnish an est estimate. The total of the payments lis to the issuer set forth in response to Pa	e purposes shown. If the imate and check the box sted must equal the adjuste	e amount for any to the left of the	/ e					
					Payments to Officers, Directors & Affiliates			Payments to Others
Salaries and fees				\$ _	0		\$	(
Purchase of real estate				\$	0		\$	
Purchase, rental or leasing and insta	allation of machinery and ed	quipment		\$	0		\$	
Construction or leasing of plant build	ings and facilities			\$	0		\$	
Acquisition of other business (includ offering that may be used in exchange	ge for the assets or securiti	es of another		\$			•	
issuer pursuant to a merger)			_	_	0		•	
Repayment of indebtedness				\$ _	0		\$	
Working capital	***************************************		L	\$ _	0		\$	
Other (specify): <u>To advance exploration active</u> properties located in the Yuk		<u>j</u>		\$	0	X	\$CDN	583,21
• •	•		Г	\$	0		\$	
Cotumn Totals			 	_	0	X		583,21
Total Payments Listed (colum			_			_		
l otal Payments Listed (colum	n totals added)			•••••	X SCOM	563,	214	
	D EEDERAL SIC	MATHRE						
The increase has distributed this making to	D. FEDERAL SIG		-1		an If this		:- 51	4
The issuer has duly caused this notice to Rule 505, the following signature constituent Commission, upon written request of its strangraph (b)(2) of Rule 502.	utes an undertaking by th	e issuer to furni:	sh t	o the	U.S. Secui	rities :	and Ex	change
Issuer (Print or Type)	Signature	00	Date	1				
Northern Freegold Resources Ltd.	Susan	P. Cray			January	10, 2	007	
Name of Signer (Print or Type)	Title of Signer							.
Susan P. Craig	Director and VP Corporate Affairs							

— ATTENTION —

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)